

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P92000008670

1. Entity Name

THE AUSTIN GROUP, INC.

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90424 041 ***150.00

Principal Place of Business

1408 N WESTSHORE BLVD.
STE 1002
TAMPA FL 33607
US

Mailing Address

1408 N. WESTSHORE BLVD.
STE 1002
TAMPA FL 33607-4512
US

2. Principal Place of Business

1211 N. Westshore Blvd.

3. Mailing Address

1211 N. Westshore Blvd.

Suite, Apt. #, etc.

Suite 700

Suite, Apt. #, etc.

Suite 700

City & State

Tampa, FL

City & State

Tampa, FL

Zip

33607

Country

Zip

33607

Country

4. FEI Number

59-3157293

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

AUSTIN, ALFRED S.
1408 N. WESTSHORE BLVD.
STE 1002
TAMPA FL 33607

Name

Austin, Alfred S.

Street Address (P.O. Box Number is Not Acceptable)

1211 N. Westshore Blvd.

Suite #700

City

Tampa

FL

Zip Code

33607

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE COO ☐ Delete
NAME AUSTIN, ALFRED S
STREET ADDRESS 1408 N. WESTSHORE BLVD, SUITE 1002
CITY-ST-ZIP TAMPA FL

TITLE COO ☒ Change ☐ Addition
NAME Austin, Alfred S.
STREET ADDRESS 1211 N. Westshore Blvd. Suite #700
CITY-ST-ZIP Tampa, FL 33607

TITLE P ☐ Delete
NAME MICHAEL FIELDS
STREET ADDRESS 1408 N WESTSHORE BLVD #1002
CITY-ST-ZIP TAMPA FL 33607

TITLE P ☒ Change ☐ Addition
NAME Michael Fields
STREET ADDRESS 1211 N. Westshore Blvd. Suite #700
CITY-ST-ZIP Tampa, FL 33607

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-19-00

813-289-3886

Date

Daytime Phone #

CR2E034 (9/99)